

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>C.H.</i>		<i>05-24-01</i>
O.I.P.E. CLASSIFIER	<i>MTW</i>	<i>10</i>	<i>06-08-01</i>
FORMALITY REVIEW	<i>H.L.</i>	<i>1079</i>	<i>07/24/01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/20/02
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If more than 150 claims or 10 actions  
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 7/24